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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

<p style="text-align: center;">TRANSMITTAL FORM</p> <p style="text-align: center;"><i>(to be used for all correspondence after initial filing)</i></p>	Application Number	10/698,846
	Filing Date	10/30/2003
	First Named Inventor	Laurent Massoulie
	Group Art Unit	2151
	Examiner Name	John B. Walsh
<input type="checkbox"/> Sent via Express Mail Label No. :	Attorney Docket Number	304871.02

ENCLOSURES (check all that apply)

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<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement with Form PTO/SB/08A (pages) <input type="checkbox"/> Response to Notice to File Missing Parts <input type="checkbox"/> A copy of the Notice to File Missing Parts Under 37 CFR 1.52 or 1.5	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) (sheets) <input type="checkbox"/> Declaration <input type="checkbox"/> Newly Executed (pages) <input type="checkbox"/> A copy from a prior application (37 CFR 1.63(d)) (pages) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> General Power of Attorney (SB80) <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Other Enclosure(s) (please identify below): <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
CERTIFICATE OF MAILING OR TRANSMISSION (Under 37 CFR § 1.8(a))		Remarks	
I hereby certify that this correspondence is being:		<input checked="" type="checkbox"/> deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450; or <input type="checkbox"/> transmitted by facsimile on the date shown below to the USPTO at (571) _____.	
<u>January 15, 2008</u>	<u>/Darcy Kobylnarczyk/</u> Signature <u>Darcy Kobylnarczyk</u> Printed Name	<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required, or credit any overpayments, to Deposit Account No. 50-0463 for the above identified patent application.	

SIGNATURE OF ATTORNEY OR AGENT

Signature	/James T. Strom/		Reg. No.	48,702
Name of Attorney or Agent		James T. Strom		
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Customer Number:		22971		



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

First Named Inventor: Laurent Massoulie Attorney Docket No.: 304871.02
Application No.: 10/698,846 Group Art Unit: 2151
Filed: 10/30/2003 Examiner: Walsh, John B.
Customer No.: 22971 Confirmation Number: 9313
Title: SELF-ORGANIZING OVERLAY NETWORKS

Mail Stop Amendment

Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

AMENDMENT

Sir:

Please consider the following in response to the Non-Final Office Action (Notice of Non-Compliant Response) mailed 10/31/2007, having a two-month extended period for response ending 1/31/2008.

Application Number: 10/698,846